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PATENT APPLICATION
DOCKET NO.:1958.1005-001 (OID-1996-15-01)

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2186
61

NOTICE OF APPEAL FROM THE EXAMINER
TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Applicant: James E. Carey

Serial No.: 09/955,773 Group: 2186

Filed: September 19, 2001 Examiner: Bataille, Pierre Miche

Confirmation No.: 1454

For: COMPUTING SYSTEM FOR IMPLEMENTING A SHARED CACHE

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:

7-7-04

Date

Pamela Sarno

Signature

Pamela Sarno

Typed or printed name of person signing certificate

RECEIVED

JUL 15 2004

Technology Center 2100

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision dated April 7, 2004 of the Examiner finally rejecting claims 1-82. The item(s) checked below are appropriate:

1. Applicant hereby petitions to extend the time for filing a Notice of Appeal in response to the Office Action Made Final dated [] for [] month(s) from [] to [].
2. A [] month extension of time to respond to the Office Action Made Final dated [] was filed on [] with payment of a \$[] fee.
 Applicant hereby petitions for an additional [] month extension of time to respond to the Office Action Made Final.
3. A Request for Oral Hearing before the Board of Patent Appeals and Interferences is being filed concurrently herewith.

07/12/2004 55E5E1 00000154 09955773
01 FC:1401 330.00 0P

4. Fees are submitted for the following:

<input type="checkbox"/> Extension of Time for [] month(s)	\$ _____
<input type="checkbox"/> Additional Extension of Time:	
Fee for Extension ([] mo.)	\$ _____
Less fee paid ([] mo.)	- \$ _____
Balance of fee due	\$ 0 _____
<input checked="" type="checkbox"/> Notice of Appeal	\$ 330 _____
<input type="checkbox"/> Other _____	\$ _____
	TOTAL \$ <u>330</u>

5. The method of payment for the total fees is as follows:

A check in the amount of \$[330] is enclosed.

Please charge Deposit Account No. 08-0380 in the amount of \$[].

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this document is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH, REYNOLDS, P.C.

By Caroline M. Fleming
 Caroline M. Fleming
 Registration No.: 45,566
 Telephone: (978) 341-0036
 Facsimile: (978) 341-0136

Concord, MA 01742-9133

Date: 7/7/04

OIP
JUL 09 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: James E. Carey

Application No.: 09/955,773 Group: 2186

Filed: September 19, 2001 Examiner: Bataille, Pierre Miche

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PAMELA SARNO

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JUL 15 2004

Technology Center 2100

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is Amendment After Final Rejection under 37 C.F.R. § 1.116 for filing in the above-identified application.

[] Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

[] A Small Entity Statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

The fee has been calculated as shown below:

	(COL. 1)	(COL. 2)	(COL. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	
TOTAL	82	MINUS	*	82	0
INDEP					
	7	MINUS	**	7	0
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					
			RATE	ADDT. FEE	
			X \$ 9	\$	
			X \$43	\$	
			+ \$145	\$	
					OR
			RATE	ADDT. FEE	
			X \$18	\$ 0	
			X \$86	\$ 0	
			+ \$290	\$	

* not fewer than 20

** not fewer than 3

TOTAL = \$ 0

TOTAL = \$ 0

Please charge Deposit Account No. 08-0380 for the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$ _____
<input type="checkbox"/>	Amendment Fee	\$ _____
<input type="checkbox"/>	Other Fees:	\$ _____
		\$ _____
		\$ _____
		TOTAL: \$ <u>0</u>

A check is enclosed in payment of the following fees:

<input type="checkbox"/>	Petition for [] month Extension of Time	\$ _____
<input type="checkbox"/>	Amendment Fee	\$ _____
<input checked="" type="checkbox"/>	Other Fees:	
	<u>Notice of Appeal</u>	\$ <u>330</u>
		\$ _____
		TOTAL: \$ <u>330</u>

A general authorization is hereby granted to charge Deposit Account No. 08-0380 for any fees required under 37 C.F.R. 1.16 and 1.17 in order to maintain pendency of this application. A copy of this authorization is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

By Caroline M. Fleming
 Caroline M. Fleming
 Registration No.: 45,566
 Telephone (978) 341-0036
 Facsimile (978) 341-0136

Concord, Massachusetts 01742-9133

Dated: 7/7/04